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Application or Docket Number  
09-427,819

Application or Docket Number  
09-427,819

OTHER THAN  
SMALL ENTITY

(Column 2)

| RATE (\$) |   | FEE (\$) |  |
|-----------|---|----------|--|
|           |   |          |  |
|           |   |          |  |
|           |   |          |  |
| X         | = |          |  |
| X         | = |          |  |
|           |   |          |  |
|           |   |          |  |
| TOTAL     |   |          |  |

TOTAL

TOTAL.

OTHER THAN  
SMALL ENTITY

(Column 2)

(Column 3)

| SMALL ENTITY |                         |                     |
|--------------|-------------------------|---------------------|
|              | RATE (\$)               | ADDITIONAL FEE (\$) |
| CR           | / =                     |                     |
| CR           | / =                     |                     |
|              |                         |                     |
| CR           |                         |                     |
| CR           | TOTAL<br>ADDITIONAL FEE |                     |

TOTAL  
\$611.47

|    |                  |
|----|------------------|
| OF | TOTAL<br>ADD FEE |
|----|------------------|

|    | RATE (\$)         | ADDITIONAL<br>FEE (\$) |
|----|-------------------|------------------------|
| OP |                   |                        |
| OP |                   |                        |
|    |                   |                        |
| OP |                   |                        |
| OP | TOTAL<br>ALCO FEE |                        |

[illegible]

1964. *THE*  
LITERATURE

The "Highest Number Previously Paid For" (Total of Indemnity)

The "Highest Number Previously Paid For" (Total or Independent), is the highest number of copies of the appropriate document(s) for which collection of information is required by 22 CFR 171.15 (b)(2).

[illegible]

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JAN 16 2006


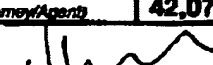
|  |                               |                          |
|--|-------------------------------|--------------------------|
| <b>REQUEST<br/>FOR<br/>CONTINUED EXAMINATION (RCE)<br/>TRANSMITTAL</b><br><br>To Commissioner For Patents<br>Please enter the following submission and withdraw the finality of the proceeding office<br>action or withdraw any pending appeal and reopen prosecution before the Examiner. | <b>Applicant Number</b>       | 09/427,819               |
|  | <b>Filing Date</b>            | October 27, 1999         |
|  | <b>First Named Inventor</b>   | Engelbertus Van Willigen |
|  | <b>Group Art Unit</b>         | 2132                     |
|  | <b>Examiner Name</b>          | A. Nobahar               |
|  | <b>Attorney Docket Number</b> | N 17,168                 |

This is an RCE under 37 C.F.R. § 1.114 of the above-identified application (which is made prior to: payment of issue fee; abandonment; notice of appeal to the CAFC; or commencement of civil action under 35 U.S.C. 145 or 146.)

**1. Submission required under 37 C.F.R. § 1.114**a. ☒ Previously submittedi. ☒ Consider the amendment(s)/reply under 37 C.F.R. § 1.118 previously filed on December 6, 2005  
Any unentered amendment(s) referred to above will be entered).ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_\_iii. ☐ Other \_\_\_\_\_b. ☐ Enclosedi. ☐ Preliminary Amendmentii. ☐ Affidavit(s)/Declaration(s)iii. ☐ Information Disclosure Statement (IDS)iv. ☐ Other \_\_\_\_\_ (may not be a brief)


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**2. Miscellaneous**a. ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of \_\_\_\_\_ months. (May not exceed 3 months; Fee required per 37 C.F.R. § 1.117(f))b. ☐ Other \_\_\_\_\_**3. Fees**a. ☒ The Commissioner For Patents is hereby authorized to charge all required fees except the issue fee or credit any overpayments, to Deposit Account No. 14-1270**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED**

|                          |   |  |  |
|--------------------------|---|--|--|
| <b>Name (Print Type)</b> | Daniel A. Plotrowski  | <b>Registration No. (Attorney/Agent)</b> | 42,079   |
| <b>Signature</b>         |  | <b>Date</b>                              |  |

**CERTIFICATE OF MAILING OR TRANSMISSION**

I hereby certify that this is being deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner For Patents, Mail Stop RCE, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office toll-free: (571) 273-8300 on the date below:

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| <b>Name (Print Type)</b> | Edna Chapa  | <b>Date</b> | 1/16/06 |
| <b>Signature</b>         |  |             |         |